

City of Riverside Personnel Policy and Procedure Manual

Approved:	
	Personnel Director
	City Manager

Number: VI-3 Effective Date: 5/92

SUBJECT: EMPLOYEE LEAVE DONATION PLAN

PURPOSE:

To establish a procedure whereby City employees may, as a humanitarian act, donate their own accrued vacation leave to another employee who has exhausted all of their paid leave as a result of a serious non-job related illness or injury to themselves or a member of their immediate family. Sick leave, compensatory time, holiday accruals, or any other form of compensation cannot be donated through this plan.

POLICY:

The following criteria shall be utilized in establishing and maintaining an Employee Leave Donation Plan:

- 1. The employee for which the contribution is being donated (recipient) must be a regular employee of the City with a least six months of continuous service. (Part-time employees who are recipients may not utilize donations of hours greater than the number of hours for which they are regularly scheduled.)
- 2. The recipient employee must have exhausted all of their own paid leave (sick leave, vacation, compensatory time, floating holiday), and be facing a financial hardship.
- 3. The recipient employee is unable to work as a result of a serious non-job related injury or illness to the employee or a member of their immediate family.
- 4. Any regular City employee who has completed at least six months of continuous service may donate their accrued vacation leave in increments of 2 hours provided that the donor maintains a minimum balance of two weeks of vacation for their own use. The donor may request that the donation be made anonymously.
- 5. The total amount of hours donated to any individual shall not exceed 520 hours received in any calendar year.
- 6. Only the recipient employee for which the Employee Leave Donation Plan has been established may receive donated hours from said plan. Such donated hours shall be added to the employee's sick leave balance, as needed.
- 7. Requests for an Employee Leave Donation Plan shall be on forms provided by the City and shall be with the request of the department head and concurred with by the Personnel Director. Any appeals shall be resolved by the City Manager.

- 8. Donations shall be on a dollar for dollar basis. The value of donated leave time shall be calculated at the donor's regular pay rate, then converted to hours of sick leave at the recipient's regular pay rate to the nearest half (0.5) hour to determine the number of leave hours.
- 9. The plan shall be administered so that hours shall be used only as needed and in the order donated. Unused donated hours shall be returned to the donating employee in increments of no less than one hour.

PROCEDURE:

Responsibility	Action
Employee	 Submits to their department head a request for the City to set up an Employee Leave Donation Plan on their behalf by completing Request for Creation of an Employee Leave Donation Plan (Form 1210.001).
	2. In case of an emergency whereby the employee needing the donation is incapacitated and unable to complete the required forms, another employee may complete the forms and submit them to the department head with authorization from a member of the employee's immediate family. The department head may also recommend the establishment of an Employee Leave Donation Plan.
Department Head	 Forwards to the Personnel Department, with recommendation, the "Request for Creation of an Employee Leave Donation Plan" for a specific employee.
Personnel Department	 Reviews the request and, if approved, a copy of the completed request is distributed to the originating department, and the Finance Department/Payroll Section for processing.

City Manager

Department

Department Head

Finance Department/Payroll Division

- Shall consider any appeals of a denial of a request by employee(s) to establish an Employee Leave Donation Plan. The City Manager's decision is final.
- With the concurrence of the 6. recipient or his/her designee, publicizes the need for donors. general distribution or publication of the need for donors shall be coordinated with the Personnel Department. The Personnel Department shall collect donor commitment cards. Request and Authorization to be a Donor to an Employee Leave Donation Plan (Form 1210.002) from qualified City employees. These cards shall be to the Personnel submitted Department for approval or denial and subsequent submission of approved cards to the Finance Department/Payroll Section for processing.
- 7. Shall take actions to insure that employees are not pressured into donating.
- 8. Shall be responsible for adjusting vacation and sick leave accounts.

 A summary sheet shall be maintained for each recipient employee.
- Donor cards shall be used only as needed and shall be used in the order of date signed. All unused donated whole hours shall be returned to the donating employee.

Attachments:

- 1. Request for Creation of an Employee Leave Donation Plan (1210.001)
- 2. Request and Authorization to be a Donor to an Employee Leave Donation Plan (1210.002)

REQUEST FOR CREATION OF AN EMPLOYEE LEAVE DONATION PLAN

Employee:		Employee#:					
(Recipient)	Last Name	First Name	MI	-			
Classification:							
	Title	Department		Division			
The above listed their behalf.	d employee requests	that the City of Riverside	e set up an er	nployee leave donation plan on			
vacation, comp	nployee certifies that the ensatory time, floating them financial ha	g holiday) as of	f their available	e accrued leave (i.e., sick leave, _, and that being on an unpaid			
The employee of	cannot return to work	for the following reason	1 :				
PLEASE ATTACH S	SUPPORTING MEDICAL S	STATEMENTS FROM ATTEND	NING PHYSICIAN(S)			
Employee's (red	cipient) signature						
			Date	- Commence of the Commence of			
Recommendation	on of Department Hea	ad:					
I approve this re	equest for the following	ng reason(s):					
I recommend th	nat the request be der	nied for the following re	ason(s):				
	1.01	Andrews	Data				
Department Hea	ad Signature		Date				
Action of Person	nnel Director:						
Approved _	Si	gnature					
Denied _	Da	ate					
COPIES OF FIN				RIGINATING DEPARTMENT			

Form No. 1210.001

REQUEST AND AUTHORIZATION TO BE A DONOR TO AN EMPLOYEE LEAVE DONATION PLAN

Employee:			Emp	Employee#:	
(Recipient)	Last Name	First Name	MI Soc.	Sec. #:	
Classification:					
	Title		Department	Division	
	employee requests and rown accrued vacation	leave to the following	employee's sick lea	er hours (2 hours ve account: not be	
unused vacation Donors must reta	t is submitted. Donate leave will be returned ain 2 weeks of vacation	to the <u>donating em</u> n for their own use.	oloyee in increments	of the date donated. Any sof not less than 1 hour and the first that the first th	
Employee (Donor) Signature:		Date_		
☐ Check	only if you wish to ma	ke your donation and	onymously.		
Department Head	d Approval and Verifica	tion for the Donation	of Paid Time:		
Donor's Departm	ent Head Signature		Date_		